

Canadian Society of Nephrology Endorsement Policy

Background

The Canadian Society of Nephrology (CSN) is frequently requested to endorse clinical practice guidelines, consensus statements, position papers, policies, programs and resources developed by organizations, working groups or individuals. In 2018, the CSN Clinical Practice Guideline Committee (CPGC) developed an endorsement process for clinical practice guidelines utilizing a systematic framework (eg GRADE). Clarification and expansion of this process was subsequently requested by the CSN Board of Directors to accommodate other items for endorsement. For example, consensus statements are developed by a panel of experts after a review of the literature. While a rigorous framework such as GRADE may not be utilized, both clinical practice guidelines and consensus statements can provide high quality clinical guidance to improve patient care.

This policy is only applicable to endorsement of clinical practice guidelines or consensus statements, assessed by the CSN CPGC for suitability by the criteria listed below. Other items out of scope for CSN CPGC (eg. position papers, educational tools, policies, programs, devices, molecules, resources etc) may be considered on a case-by-case basis and reviewed for endorsement by the CSN Officers.

Considerations for CSN CPG Committee Endorsement

As the official clinical practice guideline committee for the CSN, there are several considerations when seeking endorsement from our committee, and also for the committee to consider when evaluating prospective guidance documents. Our group has previously published our methods in guideline development and adapting clinical practice guidelines, which can be accessed for further details¹. Though we endorse guidance documents from organizations that are specific to kidney disease, we also provide endorsements to other organizations that are relevant to the Canadian Nephrology community, people living with kidney disease, and other stakeholders.

For endorsement for clinical practice guidelines or consensus statements, please see below for our approach:

- 1. We invite groups to access our endorsement application form on the CSN website and submit a request for an endorsement via email at endorsements@csnscn.ca
- 2. Guideline will be screened by CSN CPGC Chair and/or Vice-Chair.
 - a. If the guideline is from KDIGO or KDOQI, we will automatically move to endorsement which may be supplemented by adapting the guideline to the Canadian context if needed (using the ADAPTE collaboration framework)².

- b. Otherwise, if after preliminary screen by Chair or Vice Chair, it is deemed that the request meets the scope and eligibility criteria for the CSN CPGC, a small panel (2-3 members without a conflict of interest in the topic) of the CSN CPGC will be formed to conduct a formal review (Step 3).
- 3. The formal review of the guideline for endorsement will include focus on:
 - a. Relevance and importance to the CSN, CSN membership, Canadian Nephrology community, and people living with kidney disease. We will evaluate the proposed guidance document with consideration of the priorities of patients, family members, and clinical or research stakeholders in our topic prioritization work. We will also evaluate the document for relevance to, and alignment with CSN's Strategic Plan.
 - b. Real or Perceived Conflict of Interest. Funding source and authorship will be assessed. Documents drafted with sponsorship in full or part by pharmaceutical companies or lobby organizations will have additional review, and may be forwarded to CSN Officers or other relevant CSN committees for review. We will also evaluate the applicant's organization policy on conflicts of interest management and how document development accounted for these (i.e., disclosures of interest statements and policies).
 - c. Scientific Rigor. We will evaluate the methodology used (including literature search, evidence synthesis, methods for formulating recommendations etc.). The review panel will use the AGREE II framework³ to assess the quality of the submitted clinical practice guidelines. Priority for endorsement will be given to guidelines that utilize a formal framework for development (e.g., GRADE or other)
 - d. Equity, Diversity, Inclusion, and Access. Guidelines produced by the CSN CPGC account for these important principles, and we expect other organizations will follow similar principles. As part of our endorsement application process, we ask that requestors provide information about how these principles were accounted for in their guideline development (e.g., selection process for Working group chair and panel members, dissemination plan etc.)
- 4. The reviews will be completed at least in duplicate, and reviewed with either CSN CPGC Chair or Vice-chair. Once this is completed, a summary recommendation will be drafted and presented to the CPGC at-large. Members will vote to achieve majority consensus on: a) endorsing the guideline by the CSN without commentary, b) endorsing the guideline by the CSN with commentary (informed by ADAPTE framework), or c) declining with no further action by the CSN or CPGC.
- 5. Once the endorsement application has had a full review, we will notify the CSN Officers of our decision and provide information that supported this recommendation.

The CSN reserves the right to decline endorsement of any application at any time in the process of review. Should the CSN determine not to endorse, the applicant will be provided an explanation for rationale.

Please note that we require a minimum of 6-8 weeks processing time for any endorsement application request.

What endorsement means from the CSN CPGC

If applications for endorsement are accepted by the CSN CPGC, we will draft an endorsement letter outlining our specific policy for endorsement that was followed, and what (if any) our involvement in the development included. Our endorsement will apply only to the document being reviewed and does not apply to future revisions or other documents developed by requesting organizations. Our involvement as an endorsing organization does not merit inclusion as an author for the endorsed guidelines, but acknowledgement of our society's endorsement is welcomed in scholarly outputs (i.e., scientific publication, etc.).

In addition to an endorsement letter, we will host a link to the endorsed guideline or publication on our website for 3 years, after which it will be moved to an archived portion of the website as we expect that recommendations will not be current after this period of time.

If there are any questions about this process, please contact <u>endorsements@csnscn.ca</u> for further assistance.

REFERENCES

- 1. Mustafa RA, Levin A, Akbari A, et al. The Canadian Society of Nephrology methods in developing and adapting clinical practice guidelines: a review. *Can J Kidney Health Dis.* 2014;1:5.
- 2. Fervers B, Burgers JS, Voellinger R, et al. Guideline adaptation: an approach to enhance efficiency in guideline development and improve utilisation. *BMJ Qual Saf.* 2011;20(3):228-236.
- 3. Brouwers MC, Kho ME, Browman GP, et al. AGREE II: advancing guideline development, reporting and evaluation in health care. *Cmaj.* 2010;182(18):E839-842.